

Linda McCulloch, Superintendent Office of Public Instruction Accreditation Division PO Box 202501Helena MT 59620-2501

DISTANCE LEARNING 2005-2006 School Year

DUE DATES: To County Superintendent: Tuesday 10/18/2005 To Office of Public Instruction, Accreditation Division: Tuesday 10/25/2005

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Purpose: This annual report will provide the Office of Public Instruction with the necessary information to meet the requirements of 10.55.907 ARM - Distance, Online, and Technology Delivered Learning - Revised March 2004. Yes/No 1. Does the district utilize distance learning to fulfill elementary or middle school basic education program requirements and/or high school graduation requirements as provided for in 10.55.907 ARM? If YES to Question 1: 2. Does the district use a provider who is registered with the OPI – 10-55-9078 (5)(a)? NOTE: Only private or commercial providers are required to register with the OPI? 3. Does the district provide a facilitator in accordance with the standard – 10.55.907(3)(a-b)? 4. Does the district provide training for the facilitator, either licenses or non-licensed, in accordance with the standard -10.55.907(3)(c)? 5. Provide the following information for all providers the district is currently using. Create one record for each Company/District. List all the courses from that provider. Copy this page as necessary. City, State, Zip Name Address Phone **Email** Course Name Grade Level Number of Students Phone Name Address **Email** City, State, Zip

Course Name	Grade Level	Number of Students

Distance L	earning Page 2			District: School:		Le: _Sc:
5. Continu	ued					
Name	Address	Phone	E	mail	City, State, Zi	D
	Course Name	Crode	e Level	Number of S	tudonto	
	Course Marrie	Grade	Level	Number of S	ludents	
						Yes/No
6. Is the d	istrict a provider of distar	nce learning for oth	ner schoo	ol districts in Mo	ontana?	
7. Provide	the following information	n for all districts yo	u are cui	rently serving.		
District Name				ol being served		
	Course Name	Teach Numb	ner's Foli er	o Grad	de Level(s)	
District Na	ame		School	ol being served		
	Course Name	Teach Numb	ner's Foli er	o Grad	le Level(s)	
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District Name			School	ol being served		
	Course Name	Teach Numb	ner's Foli er	o Grad	le Level(s)	

County: